



SASKATCHEWAN FORMULARY BULLETIN

Update to the 61st Edition of the Saskatchewan Formulary

Product	DIN	Pre-Markup (\$)	Unit Price (\$)
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New Full Formulary Listings Effective April 1, 2012:

Twynsta tablet (telmisartan/amlodipine) (BOE)

40mg/5mg tablet	02371022	0.6819	0.7399
40mg/10mg tablet	02371030	0.6819	0.7399
80mg/5mg tablet	02371049	0.6819	0.7399
80mg/10mg tablet	02371057	0.6819	0.7399

New Exception Drug Status (EDS) Listings Effective April 1, 2012:

Brilinta tablet (ticagrelor) (AST)

90mg tablet	02368544	1.4800	1.6058
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For treatment initiated by cardiologists and internists in patients with stent thrombosis while on clopidogrel in the preceding 28 days.

Victrelis capsule (boceprevir) (MRK)

200mg capsule	02370816	12.5000	12.7977
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Victrelis Triple combination kit (boceprevir/ribavirin plus peginterferon alfa-2b) (MRK)

200mg/200mg capsule	02371448	16.5800	16.8900
80mcg/0.5ml powder for solution			
200mg/200mg capsule	02371456	13.2700	13.5200
100mcg/0.5ml powder for solution			
200mg/200mg capsule	02371464	11.3600	11.5700
120mcg/0.5ml powder for solution			
200mg/200mg capsule	02371472	9.0900	9.2600
150mcg/0.5ml powder for solution			

For the treatment of chronic hepatitis C genotype 1 infection in patients with compensated liver disease, in combination with peginterferon alpha/ribavirin when all of the following criteria are met:

- detectable levels of hepatitis C virus (HCV) RNA in the last six months
- a fibrosis stage of F2, F3, or F4
- patient not co-infected with HIV
- one course of treatment only (up to 44 weeks duration).

Product	DIN	Pre-Markup (\$)	Unit Price (\$)
Incivek tablet (telaprevir) (VER) 375mg tablet	02371553	69.3810	69.6786

For the treatment of chronic hepatitis C genotype 1 infection in patients with compensated liver disease, in combination with peginterferon alpha/ribavirin when all of the following criteria are met:

- detectable levels of hepatitis C virus (HCV) RNA in the last six months
- a fibrosis stage of F2, F3, or F4
- patient not co-infected with HIV
- one course of treatment only (12 weeks duration).

New Exception Drug Status (EDS) Listing Under the Saskatchewan MS Drugs Program Effective April 1, 2012:

Gilenya capsule (fingolimod hydrochloride) (NVR) 0.5mg capsule	02365480	85.1648	86.9508
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For the treatment of relapsing-remitting multiple sclerosis where there has been:

- *Failure to respond to full and adequate courses of at least one interferon beta formulation and glatiramer acetate, or contraindications to these therapies.*
- *Two or more disabling relapses in the previous year.*
- *Significant increase in T2 lesion load compared with that from a previous magnetic resonance imaging (MRI) scan or at least one gadolinium-enhancing lesion.*

In addition, fingolimod treatment should be stopped in patients with relapsing remitting MS who meet either of the following criteria:

- *Failure to achieve at least a 50% reduction from baseline in the average annual relapse rate after two years.*
- *Attainment of an Expanded Disability Status Scale (EDSS) score of greater than 5.0.*

Additional Formulation of a Current Exception Drug Status (EDS) Listing Effective April 1, 2012:

Intencele tablet (etravirine) (JAN) 200mg tablet	02375931	10.9000	11.7334
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For use in combination with other antiretroviral agents for the treatment of HIV-1 strains resistant to multiple antiretroviral agents, including non-nucleoside reverse transcriptase inhibitors. *This drug, as with other antivirals in the treatment of HIV, should be used under the direction of an infectious disease specialist.*

Tobi Podhaler inhalation powder (tobramycin) (NVR)			
28mg capsule	02365154	12.8588	13.0820

For the treatment of cystic fibrosis patients intolerant to injectable tobramycin when used for inhalation.

Revised Hospital Benefit Drug Listings Effective April 1, 2012:

• **fomepizole, injection, 1.5ml (1g/ml) (Antizol-JAZ)**

Restricted Coverage: This product should be used to initiate therapy for methanol and ethylene glycol poisonings, and restricted to use in patients with known or suspected toxic alcohol (e.g. methanol, ethylene glycol) poisoning meeting at least one of the following criteria:

- *Plasma concentration of either ethylene glycol > 3 mmol/L or methanol > 6 mmol/L.*
- *Documented recent history of ingestion of toxic amounts of methanol or ethylene glycol and an osmol gap > 10 mosm/L.*
- *Suspected ingestion of either methanol or ethylene glycol with at least two of the following: serum pH < 7.3, osmol gap > 10 mosm/L, serum carbon dioxide < 20 mmol/L, presence of oxalate crystalluria.*

This product should be used in consultation with the Poison and Drug Information Service (PADIS). A contact number for PADIS is 1-866-454-1212.

Drugs Reviewed and Not Approved for Listing in the Saskatchewan Formulary:

- **Abstral** sublingual tablet, 100mcg, 200mcg, 300mcg, 400mcg, 600mcg, 800mcg (fentanyl citrate) (PAL)
- **Nplate** powder for solution, 250mcg/0.5mL vial, 500mcg/mL vial (romiplostim) (AMG)
- **Revolade** tablet, 25mg, 50mg (eltrombopag) (GSK)

Saskatchewan Ministry of Health
Drug Plan and Extended Benefits Branch
2nd Floor, 3475 Albert Street
Regina, Saskatchewan S4S 6X6
(306) 787-3317
1-800-667-7581

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